Issue	Classif	fication

Application No.	Applicant(s)	
09/766,098	KARLSSON, GORAN	I
Examiner	Art Unit	
Sheridan K Shedden	1653	

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			ORIGI	NAL	54.1 (220, 10 az			CRO	SS REFERENC	E(S)		t agendarii ey (COC)				
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(Assistant Examiner) (Date)							- Cee Ima REN COCHRANE		Total Claims Allowed: 11							
(Legal Instruments Examiner) (Date)							PRIMARY E	XAMINER (/)	O.G. Print Clai	O.G. Print Fig.						

	Claims renumbered in the same order as presented by applicant							☐ CPA			☐ T.D.			☐ R.1.47					
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